

Georgia Construction Industry Licensing Board  
237 Coliseum Drive  
Macon, GA 31217-3858  
(478) 207-1416  
[www.sos.state.ga.us](http://www.sos.state.ga.us)

### Complaint Form

Please type or print the information requested and mail this form to the above address.

1. Type of work:   \_\_\_ Heating & Air Conditioning           \_\_\_ Electrical  
                          \_\_\_ Plumbing       \_\_\_ Low Voltage\*       \_\_\_ Underground Utilities

Note: Contractors in the above trades are licensed by this board. The board cannot consider complaints on other types of work. **\* Low Voltage work may involve alarm systems, telecommunications systems, or other systems involving low voltage wiring.**  
**If this complaint is based on unlicensed work, attach copy of any advertisements or photos of unlicensed activities.**

2. Your name and address:

\_\_\_\_\_  
Last Name       First       Initial

\_\_\_\_\_  
Address

\_\_\_\_\_  
City                      State       Zip

\_\_\_\_\_  
\_ (\_\_\_\_) \_\_\_\_\_  
Home Phone       Day Phone

3. Address where work was performed,  
if different than above:

\_\_\_\_\_  
Address

\_\_\_\_\_  
\_ (\_\_\_\_) \_\_\_\_\_  
Phone Number

4. Complaint against:

\_\_\_\_\_  
Business Name

\_\_\_\_\_  
Last Name               First       Initial

\_\_\_\_\_  
License Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
City                      State       Zip

\_\_\_\_\_  
\_ (\_\_\_\_) \_\_\_\_\_  
Phone Number

5. Work was: \_\_\_\_ New building construction \_\_\_\_ New system installation  
\_\_\_\_ Repair/remodel
6. Did you sign a contract? \_\_\_\_ Date of contract \_\_\_\_  
Amount of contract \$\_\_\_\_ Amount paid \$\_\_\_\_
7. Date work began \_\_\_\_ Was work completed? \_\_\_\_ If so, date  
completed \_\_\_\_
8. How did you obtain the contractors name? \_\_\_\_  
\_\_\_\_
9. Attach copy of letter to the contractor describing your problem. What was the contractors  
response? (Attach copy of letter, if received) \_\_\_\_  
\_\_\_\_
10. If the city or county requires permits and inspections, was the work permitted? \_\_\_\_\_. Was  
the work inspected? \_\_\_\_\_. Did the work pass inspection? \_\_\_\_\_. Name of city or county  
\_\_\_\_\_. What actions has the inspection department  
taken? \_\_\_\_\_.  
\_\_\_\_\_  
(Attach copy of permit and inspection report, if available)
11. Does an attorney represent you in this matter? \_\_\_\_\_. If so give:
- |                  |                           |
|------------------|---------------------------|
| _____<br>Name    | _____<br>Telephone number |
| _____<br>Address | _____<br>City State Zip   |
12. Explain your complaint fully. Include a description of the problems, the actions you have  
taken to have the problem corrected, and the responses or actions of the contractor. Describe  
the events in the order in which they occurred. Attach additional sheets if needed. Attach  
copies of contract, invoices, correspondences, and any available photos of job.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_